

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

Docket No. (Optional)

33396-177202

MAY 26 2004

In re Application of Hamied et al.

Application Number  
10/026949-Conf. #7990

Filed  
December 27, 2001

For: PHARMACEUTICAL COMPOSITIONS CONTAINING NEW  
POLYMORPHIC FORMS OF OLANZAPINE AND USES THEREOF

Art Unit 1624

Examiner B. L. Coleman

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

- |  |    |        |
|--|----|--------|
| <input type="checkbox"/> One month (37 CFR 1.17(a)(1))               | \$ |        |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2))              | \$ |        |
| <input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3)) | \$ | 950.00 |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4))             | \$ |        |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5))             | \$ |        |

☐ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ \_\_\_\_\_.

☒ A check in the amount of the fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☐ The Director has already been authorized to charge fees in this application to a Deposit Account.

☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 22-0261.

I have enclosed a duplicate copy of this sheet.

I am the ☐ applicant/inventor.

☐ assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☐ attorney or agent of record. Registration Number \_\_\_\_\_

☒ attorney or agent under 37 CFR 1.34(a).

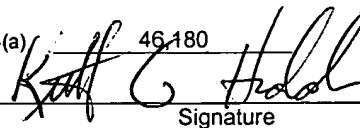
Registration number if acting under 37 CFR 1.34(a) \_\_\_\_\_

May 20, 2004

Date

(202) 344-4000

Telephone Number



Signature

Keith G. Haddaway, Ph.D.

Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below

☐ Total of 1 forms are submitted.

DC2/549618

05/21/2004 SSITHIB1 00000113 10026949

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950.00 DP